

# Kernersville Parks & Recreation

*"We're How You Play."*

## Volunteer Agreement Form

Thank you for volunteering with the Town of Kernersville. Your service is very much appreciated and will have a positive impact on this community. Volunteers make it possible for the Town of Kernersville to provide a higher level of service and promote the well-being and quality of life for all citizens. Congratulations for your contribution.

Volunteer Name: \_\_\_\_\_

Volunteer Position accepted \_\_\_\_\_

I have reviewed the attached position/project description and I agree to fulfill the duties and responsibilities as described.

I verify all the information on the attached application is correct.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

### Emergency Notification Information

\_\_\_\_\_  
**Name**      **First**                      **Last**                      **Relationship**

\_\_\_\_\_  
**Phone**      **(Home)**                      **(Work)**

Please return this form to  
Sharon Williams, Recreation Program Supervisor

PO Box 728, Kernersville NC, 27285 Fax: 336-992-0070 Phone: 336-996-3062

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## Volunteer Application Form

No volunteer information including name or address will be shared with any other source, sponsor or vendor.  
Volunteers under the age of 16 must be accompanied by an adult

Date: _____	Name: _____	_____	_____	_____
	First	MI	Last	
Address: _____	City: _____	State: _____	Zip Code: _____	
Phone: (H) _____	(W) _____	Email: _____		
DOB: _____	Drivers License # _____	State: _____	Expiration Date: _____	
Medical Conditions we should be aware of (allergies to Bee Stings): _____				
Position you are applying for _____ Location where you will be volunteering? _____				
When are you available? (Check all that apply) <input type="checkbox"/> Weekdays <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends <input type="checkbox"/> AM <input type="checkbox"/> PM				
Reason for Volunteering: _____				
Education: (Highest Level Completed) _____ Occupation: _____				
Hobbies, Interests, Skills: _____				
_____				
Population you want to work with? (Check all that apply) <input type="checkbox"/> Adults <input type="checkbox"/> Seniors <input type="checkbox"/> Teens <input type="checkbox"/> Youth <input type="checkbox"/> Preschool				
Are you bilingual? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes what languages? _____				
Have you ever worked for Kernersville Parks & Recreation Department? Yes _____ No _____				
If yes, where did you work? _____				
Do you have any relatives who work for the Kernersville Parks & Recreation Department? Yes _____ No _____				
If yes, what is their name? _____				
In the past 5 years, have you been convicted of a misdemeanor (including traffic violations)? Yes _____ No _____				
If yes, give details _____				
Have you ever been convicted of a felony? Yes _____ No _____				
If yes, give details _____				
Indicate any pending charges against you by checking: None _____ Misdemeanor _____ Felony _____				

List two personal references: Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

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## Volunteer Waiver and Release

I understand that I will be providing my services without compensation and will not be considered an employee, agent or representative of the Town of Kernersville and am not entitled to any benefits of any kind, including, but not limited to, unemployment, workers' compensation or retirement benefits.

I also understand I am solely responsible for my health and safety, and acknowledge I am physically capable of participating in this volunteer service. I am aware of the risks and dangers inherent in participating in this volunteer service and may cease my participation in this activity or decline to participate at any time. I accept and assume these risks and agree to release, discharge and hold harmless the Town of Kernersville, its officers, employees, partners, and agents from any and all actions, the actions of others, or from dangerous or defective property or equipment, known or unknown, now existing or which may arise in the future, on account of or in any way related to or arising out of my participation in this volunteer service.

I understand that on occasion, a volunteer may be entrusted with information or have access to records or files deemed confidential in nature. I agree to hold confidential all information, material, and events I have access to in the course of my volunteer assignment. I understand that divulging confidential material to unauthorized persons may result in dismissal from my volunteer position and/or other actions as deemed appropriate.

I understand that signing this Volunteer Waiver and Release is a condition of my participation in this volunteer service. I have carefully read this Waiver and Release and fully understand its contents. If I am under eighteen (18) years of age, my parent or legal guardian has completely reviewed this Waiver and Release, understands and consents to its terms, and authorizes my participation by his/her signature below.

In addition, I give my permission for the use of my name, and photographs or digital images of me and/or my children in materials and publications produced and distributed by the Town of Kernersville, without compensation. The images may be used in any manner or media without any notification, inspection or compensation. I release the Town of Kernersville and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such recording or use.

Participant: \_\_\_\_\_ Date: \_\_\_\_\_  
Print name

Participant signature: \_\_\_\_\_

Parent/Guardian if under eighteen years of age: \_\_\_\_\_  
Print

Signature of Parent or Guardian: \_\_\_\_\_

Please return this form to  
Kernersville Parks & Recreation Department  
Sharon Williams, Recreation Program Supervisor  
PO Box 728, Kernersville NC, 27285 Fax: 336-992-0070 Phone: 336-996-3062

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## **Volunteer Service Description**

Position Title:

Department/Location of Position:

Work Hours for Position:

Position Description: